Application Data Sheet

Application Information

Application number::

Unassigned

Filing Date::

Herewith

Application Type::

Continuation

Subject Matter::

Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title::

AN OBJECT ORIENTED MICROFLUIDIC

DESIGN METHOD AND SYSTEM

Attorney Docket Number::

020174-006810US No

Request for Early Publication::

Request for Non-Publication::

Suggested Drawing Figure::

23

Nο

Total Drawing Sheets:: Small Entity?::

Yes

Latin name::

Variety denomination name::

Petition included?::

No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.::

No

Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

Full Capacity

Given Name..

Gregory

Middle Name ..

Family Name::

Harris

Name Suffix::

City of Residence::

Longmont

State or Province of Residence:: CO

Country of Residence::

US Street of Mailing Address:: 1432 Chukar Drive

City of Mailing Address:: Lonamont

State or Province of mailing address:: CO

Country of mailing address:: LIS

Postal or Zip Code of mailing address:: 80501

Applicant Authority Type::

Inventor

US

Primary Citizenship Country:: Status"

Full Capacity

Given Name"

James

Middle Name..

Family Name::

Montgomery

Name Suffix::

City of Residence::

Lonamont

State or Province of Residence::

CO

Country of Residence:

LIS

Street of Mailing Address::

1413 Wildrose Drive

City of Mailing Address::

State or Province of mailing address::

Lonamont CO

Country of mailing address::

US

Postal or Zip Code of mailing address:: 80503

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity
Given Name:: Michael

Middle Name::

Family Name:: Lee

Name Suffix::

City of Residence:: Lake Oswego

State or Province of Residence:: OR
Country of Residence:: US

Street of Mailing Address:: 17171 Lowenberg Terrace

City of Mailing Address:: Lake Oswego

State or Province of mailing address:: OR
Country of mailing address:: US

Postal or Zip Code of mailing address:: 97034

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Gaius

Middle Name:: Family Name::

Family Name:: Worthington

Name Suffix::

City of Residence:: Portola Valley

State or Province of Residence:: CA
Country of Residence:: US

Street of Mailing Address:: 1019 Los Trancos Road

City of Mailing Address:: Portola Valley

State or Province of mailing address:: CA
Country of mailing address:: US

Postal or Zip Code of mailing address:: 94028

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Designation:: Representative Number:: Representative Name::

Primary 30.223 William M. Smith Associate 41 405

Chun-Pok Leung

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

This Application Continuation of 09/894,858 06/27/01

09/894.858 An Appn claiming 60/214,595 06/27/00 benefit under 35 USC

119(e) of

Assignee Information

Assignee Name:: Fluidigm Corporation

Street of mailing address:: 7100 Shoreline Court City of mailing address:: South San Francisco

State or Province of mailing address:: California

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94080